

School Resource Officer

City of Tempe Police Department

(Temporary/Non-Benefited Position)

Opening Date: June 26, 2006

Closing Date: Subject to closing when the needs of the City are met.

Hourly Rate: \$30.49 per hour – Based on a 10-month work schedule, 40 hours per week @ \$30.49 per hour plus a \$500.00 a month insurance stipend. The funding and continuation of the position is to be evaluated on a year-by-year basis as it is contingent upon grant renewal.

Minimum Qualifications:

- Requires AZPOST (Arizona Peace Officer Standards and Training) certification.
- Applicant must possess or be able to obtain a valid Arizona driver's license.
- Must pass quality control phases of lateral entry.

Recommended Qualifications:

- Prior experience as a Tempe Police Officer is desirable, but not mandatory.
- 2 years of patrol experience in a city, county, or state agency, but not mandatory
- Desire to work with students, educators, and parents.
- Willingness to teach law-related education.
- Supportive of prevention strategies.
- Satisfactory employment history with supporting documentation.
- Demonstrated effectiveness in working with youth.
- Oral and written communication skills.
- Ability to effectively interact and communicate with diverse sets of individuals.
- Supportive of the philosophy of the School Safety Program.
- Willingness to attend law-related education basic and advance training to implement and maintain LRE (Law Related Education) programs to meet the needs of the students.
- Working knowledge of Title 13, Title 28, and Search and Seizure laws

Additional Qualifications:

- Referred applicants not currently Tempe Police Department sworn employees will receive a polygraph, background investigation, and medical evaluation.
- The attached Automatic & Discretionary Disqualifier Questionnaire form must be signed and returned with your application. Applications that do not have this document will be disqualified.

Representative Duties:

- Prepare and maintain lesson plans and strategies for crime prevention and educational programs.
- Conduct investigations involving juvenile offenders, assisting field officers in juvenile cases and maintaining liaison with other agencies and organizations involved in juvenile matters.
- Acting as a liaison and information source between the assigned school and other bureaus of the Department or other law enforcement agencies.
- Any other duties as assigned by police supervision.

- Acting as a resource with respect to delinquency prevention
- Providing guidance on ethical issues in a classroom setting
- Explaining the law enforcement role in society to students, parents, teachers and school administrators.
- Establish liaison with school administrators, staff, students, and parents.
- Inform students of their rights and responsibilities as lawful citizens through presentation of law-related education in the classroom
- Network with community agencies that may or do provide services to the assigned school.
- Participate in campus activities, student organizations, and athletic events when feasible and appropriate.
- Provide a visible deterrence to crime while presenting a positive impression of a law enforcement officer.
- Provide appropriate information when requested to students, parents, and staff in law-related situations.
- Maintain tracking system of statistical information required by supervisor and school administration.
- Work closely with school administrators on the issue of the assessment and response to school crisis events.

**If you have any questions regarding this job opportunity, please contact
Sergeant Kim Hale at 480-350-8322.**

To Apply: Please complete an official City of Tempe Application and submit it to
City of Tempe
Human Resources Department
20 East Sixth Street
Tempe, AZ 85281

City of Tempe Automatic and Discretionary Disqualifier Questionnaire

AUTOMATIC DISQUALIFIERS

The City of Tempe Police Department will automatically disqualify any individual who can answer "Yes" to any of the following questions. **Please read and answer the following automatic disqualifiers:**

<input type="checkbox"/> Yes <input type="checkbox"/> No	Been convicted of a felony or any offense that would be a felony if committed in Arizona.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Been dishonorably discharged from the United States armed forces.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Been previously denied certified status or has his or her current certified status revoked or under suspension.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Illegally sold, produced, cultivated, or transported marijuana for sale.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Illegally used marijuana for any purpose within the past three years.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Illegally used marijuana, dangerous drugs or narcotics other than for experimentation. The use of an illegal drug is presumed to be not for experimentation if: 1. The use of marijuana exceeds a total of 20 times or exceeds 5 times since the age of 21 years. 2. The use of dangerous drugs or narcotics, other than marijuana, exceeds a total of 5 times, or exceeds 1 time since the age of 21 years.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Illegally used marijuana while employed or appointed as a peace officer.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Used any hallucinogenic drug including hallucinogenic mushrooms (except during religious ceremonies). Hallucinogenic drugs also include LSD.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Illegally sold, produced, cultivated, or transported for sale any dangerous drugs or narcotics, other than marijuana.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Illegally used dangerous drugs or narcotics, other than marijuana, for any purpose within the past seven years. 1. Examples of a dangerous drug or narcotic drug would be, but is not limited to: Cocaine, crack, etc.; Methamphetamine (Crystal Meth or speed of any kind); Anabolic Steroids (after 1994), except prescription only or FDA approved over the counter preparations.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Illegally used dangerous drugs or narcotics while employed or appointed as a peace officer
<input type="checkbox"/> Yes <input type="checkbox"/> No	Used or tried any narcotic or dangerous drug by injection.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Had a pattern of abusing prescription medication.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Convicted of or adjudged to have violated traffic regulations governing the movement of vehicles with such a frequency so as to indicate a disrespect for traffic laws and a disregard for the safety of other persons on the highway within the past three years.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Been previously employed as a law enforcement agent and since has committed or violated federal, state, or city laws pertaining to criminal activity.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Been convicted of any crime under a domestic violence statute.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Lied during any stage of the hiring process.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Falsified his or her questionnaire or application.

DISCRETIONARY DISQUALIFIERS

The following disqualifiers may, upon review by the Tempe Police Department, make you ineligible to become a City of Tempe Police Officer:

<input type="checkbox"/> Yes <input type="checkbox"/> No	Unlawful sexual misconduct?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Excessive traffic violations?
<input type="checkbox"/> Yes <input type="checkbox"/> No	DUI conviction or suspension of your Arizona driver's license as a result of a DUI.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Suspension of your Arizona driver's license or driving privileges from another state.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Commission of a felony?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Any discharge from the United States armed forces other than an honorable discharge.
<input type="checkbox"/> Yes <input type="checkbox"/> No	A pattern of failing to meet financial obligations.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Any other conduct or pattern of conduct that would tend to disrupt, diminish, or otherwise jeopardize public trust in the law enforcement profession.
<input type="checkbox"/> Yes <input type="checkbox"/> No	An inability to perform the essential functions of a Police Officer.

I certify that I have read and understand the Automatic and Discretionary Disqualifiers associated with the City of Tempe's Police Department positions.

Applicant's signature		Date



City of Tempe / Application for Employment

City of Tempe / Human Resources / 20 East Sixth Street / Tempe AZ 85281 / (480) 350-8276 / TDD (480) 350-8400 / <http://www.tempe.gov>

The City of Tempe is an Equal Opportunity / Reasonable Accommodation Employer.

The City of Tempe Promotes a Drug and Alcohol Free Workplace.

DIRECTIONS:

Read the recruitment bulletin before completing this application - request a copy if not provided. Answer all questions completely including any supplemental forms. Type or print neatly in black ink. Sign this application and all other forms. Any omission, misstatement, or falsification may be cause for rejection of this application, removal of your name from an eligibility list, or discharge from City Service.

1. Position Applying For: _____ Recruitment Code (RC#): _____
2. Name (Last, First, Middle Initial): _____
3. Social Security Number: _____
4. Mailing Address: _____
Street Address City State Zip
5. Phone Number: HOME: _____ WORK: _____
6. Driver's License (Number, State, Class): _____
7. Are you a U.S. Citizen or a non-U.S. Citizen authorized to work in the United States? Yes No
8. Have you ever worked for the City of Tempe? Yes No If Yes, from _____ (Mo/Yr) to _____ (Mo/Yr)
If you are a current City of Tempe employee, are you: Temporary? Regular?
Have you completed your initial six (6) month probationary period? Yes No
9. To assist us with verifying previous work experience and /or education, please list other names you have gone by:

10. Type of position you will accept: Full Time Part Time Regular Temporary
11. Are you claiming Civil Service Preference for Veteran's under ARS 38-492:
 - As a qualified or disabled veteran? Yes No If yes, you must submit Form DD214, or certification from the Veteran's Administration.
 - As a spouse of an eligible veteran pursuant to ARS 38-492(D)? Yes No If yes, you must submit Form DD214, or certification from the Veteran's Administration.
12. Are you related to any member of the Tempe City Council or any Tempe Commission/Board Member, or any City of Tempe employee? Yes No If Yes, indicate his/her **Name, Position, and Relationship to you:**

DO NOT WRITE BELOW THIS LINE - TURN PAGE AND CONTINUE

Q ☐ NQ ☐ A ☐ B ☐ C ☐ Application Entered ☐

HR Review ☐

Date

Department Review ☐

Date

Proof of Education and/or Professional Registration(s), License(s), and Certification(s) will be required prior to hire/promotion.

13. Do you have a High School Diploma or a G.E.D.? Yes No

14. Education from an **Accredited** College/University:

College:	Major:	Type of Degree:	Degree Completed:	Credit Hours:
			Yes No	
			Yes No	
			Yes No	
			Yes No	

15. Trade and/or Technical Schools:

Trade/Technical School:	Subject Studied:	Type of Degree:	Degree Completed:	Credit Hours:
			Yes No	
			Yes No	

16a. Professional Registration(s), License(s), and/or Certification(s) you possess ***that relate to this position:***

Type of Professional Registration, License, and/or Certification:	License Number (if applicable):	Date Received:	Expiration Date (if applicable):

16b. Special training ***that relates to this position:***

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17. List computer software program(s) with which you are proficient in operating ***that relate to this position:***

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18. List equipment with which you are proficient in operating ***that relate to this position:***

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19. Language Proficiency (Other than English):

Language:	Speak:	Read:	Write:
	Yes No	Yes No	Yes No
	Yes No	Yes No	Yes No
	Yes No	Yes No	Yes No

20. **May we contact your current employer if you are considered for hire/promotion?** Yes No

You may make copies and use as many of these sheets as necessary to continue your employment history.

Begin with your present or most recent position. List all jobs, paid or volunteer, for at least the past ten years. Your qualifications will be evaluated **solely** on the application form and, if applicable, any supplemental questionnaire(s).

RESUMES MAY **NOT** BE SUBSTITUTED FOR THE REQUESTED INFORMATION.

DO NOT WRITE "SEE RESUME" IN THE SPACES BELOW.

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Present/Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

You may make copies and use as many of these sheets as necessary to continue your employment history.

Begin with your present or most recent position. List all jobs, paid or volunteer, for at least the past ten years. Your qualifications will be evaluated ***solely*** on the application form and, if applicable, any supplemental questionnaire(s).

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DO NOT WRITE "SEE RESUME" IN THE SPACES BELOW.

Employer:	Type of Business:
Address:	Phone:
Job Title:	Number of Employees Supervised:
Supervisor (Name/Title/Phone):	
Employment Dates: from (Mo/Yr) to (Mo/Yr)	Total Time Employed: Yrs Mos
Hours Per Week:	Present/Ending Wage: \$ Per
Work Performed:	
Reason for Leaving:	

Employer:	Type of Business:
Address:	Phone:
Job Title:	Number of Employees Supervised:
Supervisor (Name/Title/Phone):	
Employment Dates: from (Mo/Yr) to (Mo/Yr)	Total Time Employed: Yrs Mos
Hours Per Week:	Ending Wage: \$ Per
Work Performed:	
Reason for Leaving:	

Employer:	Type of Business:
Address:	Phone:
Job Title:	Number of Employees Supervised:
Supervisor (Name/Title/Phone):	
Employment Dates: from (Mo/Yr) to (Mo/Yr)	Total Time Employed: Yrs Mos
Hours Per Week:	Ending Wage: \$ Per
Work Performed:	
Reason for Leaving:	

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$		Per
Work Performed:			
Reason for Leaving:			

21. Have you ever been requested or forced to resign from a position for misconduct or unsatisfactory service?

Yes No If Yes, please explain:

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22. Have you ever been convicted of a **misdemeanor** or **felony** (other than minor/civil traffic offenses), placed on probation, fined or given a suspended sentence (include military trial convictions)?

Note: Reckless operation, hit-and-run, D.U.I., excessive speeding, and similar charges are NOT considered minor traffic offenses. Moreover, an excessive number of traffic violations (including minor/civil offenses) should be reported.

Yes No If Yes, provide charges, dates and locations:

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Convictions will not automatically bar an applicant from employment for City jobs. The relationship of the conviction to the job, as well as its severity, the passage of time, and subsequent job performance will all be considered.

PLEASE READ THIS STATEMENT AND CAREFULLY REVIEW YOUR ENTIRE APPLICATION MATERIAL .

I certify that all statements made on the application form and, if applicable, any supplemental questionnaire(s) are true and complete. I understand that any omission, misstatement, or falsification may be cause for rejection of this application, removal of my name from an eligibility list(s), and/or discharge from City Service. In addition, I authorize any individual, company, organization, or institution to release any and all information concerning statements made by me on this application, and I do hereby release all parties and individuals connected therewith from all liabilities for any damages whatsoever incurred in furnishing such information.

By checking this box and typing your name below, you certify that you have read and understand the above paragraph.

Print Applicant's Name: _____ Date_____

Applicant Signature_____ Date_____

The City of Tempe does not accept faxed copies of applications.